

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece.

Troy King, Attorney General
Alabama State House
11 South Union Street
Montgomery, AL 36130

| | | |
|--|--|------------------------------------|
| A. Signature | | <input type="checkbox"/> Agent |
| <i>Taylor</i> | | <input type="checkbox"/> Addressee |
| B. Received by (Printed Name) | | C. Date of Delivery |
| | | 2/13/07 |
| D. Is delivery address different from item 1? If YES, enter delivery address below: | | |

3. Service Type

| | |
|--|--|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7005 1160 0001 2962 1393

Domestic Return Receipt

102595-02-M-1540

DS Form 3811, February 2004

Once 120 sent

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Art

Warden Billy Mitchem
 Limestone Correctional Facility
 28779 Nick Davis Road
 Harvest, AL 35749

COMPLETE THIS SECTION ON DELIVERY

| | | |
|---|-----------------------|---|
| A. Signature | <i>Frank J. L. G.</i> | <input checked="" type="checkbox"/> Agent |
| B. Received by (Printed Name) | <i>Volundar Beck</i> | <input type="checkbox"/> Addressee |
| C. Date of Delivery | | <i>2-12-07</i> |
| D. Is delivery address different from item 1? | | <input type="checkbox"/> Yes |
| YES, enter delivery address below: | | <input type="checkbox"/> No |

07CV120 Pet
 2. Article Number
 (Transfer from service label)

Domestic Return Receipt

7005 1160 0001 2962 1416

102595-02-M-1540

| | |
|--|--|
| Service Type | |
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail |
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail | <input type="checkbox"/> C.O.D. |
| 4. Restricted Delivery? (Extra Fee) | |
| <input type="checkbox"/> Yes | |